

 4026	<p align="center">Public Service Commission of Wisconsin (6602) - WIRELESS ALLIANCE LLC Commercial Mobile Radio Service Provider Annual Report For Year Ending December 31, 2004</p> <p align="center">Rules for Reporting Assessable Revenue Definitions Help</p>
<p>* - indicates required fields</p>	
<p>Signature</p> <p>I certify that I am the person responsible for accounts; that I have examined the following report and, to the best of my knowledge, information and belief, it is a correct statement of the business and affairs of said utility for the period covered by the report in respect to each and every matter set forth therein.</p> <p>Utility Name: WIRELESS ALLIANCE LLC</p> <p>Person responsible for accounts: Kristen Berg *</p> <p>Title of person responsible for accounts: Tax Analyst *</p> <p>Date: 3/30/05 * (mm/dd/yyyy)</p>	
<p>Identification</p> <p>Utility Name: WIRELESS ALLIANCE LLC</p> <p>Street Address: 3905 DAKOTA STREET SW *</p> <p>PO Box: 2000 PO Box Zip: 56308-0000</p> <p>City: Alexandria * State: MN * Zip: 56308-0000 *</p> <p>Web Site Address: www.ruralcellular.com</p> <p>Business Customers Phone: 3207622000 Example 6085551212 Ext:</p> <p>Residential Customers Phone: 3207622000 Example 6085551212 Ext:</p>	
<p>Primary Utility Contact (located at utility address)</p> <p>Name: Kristen Berg *</p> <p>Title: Tax Analyst *</p> <p>Firm/Company: Rural Cellular Corp *</p> <p>Office Address: 3905 Dakota St. SW *</p> <p>PO Box: 2000 PO Box Zip:</p> <p>City: Alexandria * State: MN * Zip: 56308 *</p> <p>Fax Number: 3208082120 Example 6085551212</p> <p>Phone Number: 3208082317 * Example 6085551212</p> <p>Email Address: kristenjb@rccw.com</p>	
<p>Officer in charge of correspondence concerning this report</p> <p>Name: David DelZoppo *</p> <p>Title: VP Finance *</p> <p>Firm/Company: Rural Cellular Corp *</p>	

Office Address: 3905 Dakota St. SW *

PO Box: 2000 PO Box Zip:

City: Alexandria * State: MN * Zip: 56308 *

Fax Number: 3208082120 Example 6085551212

Phone Number: 3208082468 * Example 6085551212

Email Address: Davidjd@rccw.com

Contact Person for Regulatory Inquiries and Complaints

Name: Kristen Berg *

Title: Tax Analyst *

Firm/Company: Rural Cellular Corp *

Office Address: 3905 Dakota St. SW *

PO Box: 2000 PO Box Zip:

City: Alexandria * State: MN * Zip: 56308 *

Fax Number: 3208082120 Example 6085551212

Phone Number: 3208082317 * Example 6085551212

Email Address: kristenjb@rccw.com

Assessable Revenues

- 1) Do you currently provide commercial mobile radio service (CMRS) service in Wisconsin? Y (Y/N) *
- 1a) If not, please state the nature of your entity's business.
- 1b) If not, do you intend to provide CMRS service in Wisconsin at a future date? (Blank/Y/N)
- 2) Do you believe that this year's CMRS revenues have already been reported to the Commission? N (Y/N) *
- 2a) If yes, provide particulars concerning annual report (utility name and number, report name, page and line number and dollar amount).
- 2b) If no, provide your assessable revenues (in 000's) for Universal Service Fund (000's)
assessment purposes.
Wisconsin Gross Intrastate Operating Telecommunications Service Revenue CONFIDENTIAL

Annual Report Notes (if applicable)

Please print this report before submitting it to the Commission. Once the report is submitted you will not be able to print it.

When the submit button is clicked, the program will check for errors and display a message to the right of any box with an error. If there are no errors, a confirmation page will appear.